Related Medlearn Matters Article #: MM3389

Date Posted: October 20, 2004

Related CR #: 3389

(Revised 10/20/04)

Revision of Common Working File (CWF) Editing for Same-Day, Same-Provider Acute Care Readmissions

## **Key Words**

MM3389, CR3389, Common Working file, CWF, Acute Care Readmissions, Same-Day, Same-Provider

## **Provider Types Affected**

Inpatient hospitals

## **Key Points**

- The effective date for MM3389 is January 1, 2004. The implementation date is January 3, 2005. When a patient is discharged/transferred from an acute care Prospective Payment System (PPS)
  - hospital and is readmitted to the same acute care PPS hospital on the same day for symptoms **related** to, or for evaluation and management of, the prior stay's medical condition, **hospitals will adjust the original claim generated by the original stay by combining the original and subsequent stay onto a single claim**.
- Services rendered by other institutional providers during a combined stay must be paid by the acute care PPS hospital as per common Medicare practice.
- Hospitals should place condition code (CC) B4 on the readmitting claim for the subsequent readmission when a patient is discharged/transferred from an acute care PPS hospital and is readmitted to the same acute care PPS hospital on the same day for symptoms unrelated to, and/or not for evaluation and management of, the prior stay's medical condition.
- Quality Improvement Organization (QIO) may request hospitals to submit medical records pertaining to the readmission.
- FIs must receive claims with CC B4 by February 1, 2005 and claims with discharges before January 1, 2005 in order to apply interest.
- Non-PPS acute care hospitals (such as Maryland waiver hospitals) do not have to combine the
  readmission bill (if related to original admission) with the original bill if the stay spans a month. The
  original bill would have to be adjusted to change the patient status code to 30 (still a patient).
  Subsequent monthly bills for this admission would be billed as interim bills, 112,113, or 114.

• Hospitals with claims that were improperly rejected due to the previous edits (i.e. claims where the readmission was for an unrelated condition) can resubmit those claims with condition code of B4.

## **Important Links**

MM3389: Revision of Common Working File (CWF) Editing for Same-Day, Same-Provider Acute Care Readmissions Revised: 10/20/2004

http://www.cms.hhs.gov/medlearn/matters/mmarticles/2004/MM3389\_1.pdf

CR3389, Transmittal #266: Revision of Common Working File (CWF) Editing for Same-Day, Same-Provider Acute Care Readmissions Revised: 10/20/2004

http://www.cms.hhs.gov/manuals/pm\_trans/R266CP.pdf